

tuberculated surface. This form of the disease closely resembles the ulcer of carcinoma. When the ulcer from the beginning has a distinctly fibrous surface, destitute of granulation, this sloughing process does not usually take place, but the discharge is still fœtid and profuse. In both cases the patient is destroyed by hectic fever, and in both, the state of the surrounding integument is similar, the same fissures are seen, with here and there a few small wart-like elevations."

"The disease resembles the ulcer of the eyelids described by Dr. Jacob, in not contaminating the lymphatic glands, in destroying every structure with which it comes in contact, and in the intractability of its nature, but it differs from the ulcer of the eyelid in the fibrous arrangement to which I have alluded; neither of the ulcers are malignant, in the full and proper meaning of the word. I have never seen the fibrous ulcer cured or even much benefited by local applications. Excision seems to be the only mode of treatment to be relied upon; it is therefore a matter of the greatest importance to be able to recognize the disease in its commencement, and before it attains such a size as to render excision impossible."—*Dublin Med. Press*, May 1844.

41. *Comminuted fracture of the base of the Cranium produced by a fall on the feet.*

By M. ROBERT. A carrier, about forty years of age, fell from a height of about thirty-five feet, on the 24th of May, and lighted on his feet. He was slightly stunned, but did not appear to be otherwise hurt, and walked home, and was able next day to return to his occupation. Four days after, he began to complain of acute pain in the right ear, and passed a sleepless night. Three weeks after, acute headache came on, and his right eye was observed to squint inwards. He then entered the hospital of La Pitie, where they endeavoured to relieve his headaches by means of bleeding, blistering, and morphia, but without affording him any relief. He then went to the hospital Beaujon, and came under the care of M. Robert. No paralysis of motion or sensation was observed in any part of the body. Fixed pain in the head, and darting pains in various parts of the body were alone complained of.

On the 20th of September, or four months after the accident, he was suddenly seized with violent delirium, and in spite of active depletion, died in twenty-four hours.

On dissection, the two clinoid processes of the sphenoid bone were found separated from each other, and from the square plate; the petrous portion of the temporal bone was fractured transversely through its upper third, and a large scale detached from the bone. Though the brain was examined with care, it presented no morbid appearances. The arachnoid membrane opposite the fractured portions of bone, and over the central portion of the posterior lobes of the brain, was slightly opaque. The eighth pair of nerves was found torn across.

M. Robert remarks, that this is one of the most interesting cases of fractured base of the cranium on record, seeing that no symptoms followed the fall which could lead to the suspicion of such a severe accident, and seeing that the fatal symptoms did not come on till four months after the injury. Dissection alone showed the probable cause of the squinting—viz., from the rupture of the eighth pair of nerves.—*Ed. Med. and Surg. Journ.*, Ap. 1844, from *l'Experience*, 28th Sept. 1843.

42. *Polypous tumour of the Bladder removed by lithontriptic instruments.*

By M. VACHE. A man addicted to strong drinks became affected with all the symptoms of stone in the bladder, constant desire to micturate, pain in passing water, which was occasionally suddenly stopped, and was frequently mixed with blood, &c. On being sounded carefully several times, a soft tumour was detected projecting from the right side of the trigonal space of the bladder. By careful manipulation it was ascertained that this tumour was connected with the bladder by a narrow neck, and, by using lithotritic instruments, it was seized and partly destroyed. The patient was put in a bath, and there passed some fragments of the polypus and a little blood. The next day more of the polypus was passed.

No fever or hemorrhage ensued; and five days afterwards, the remainder of the tumour was broken down, and many large pieces came away with the urine. The pieces had the exact character of nasal polypus. No fever or hemorrhage followed the operation; only the first urine passed after the operation contained a little blood. Eight days after, the instruments were again introduced, but no remains of the tumour could be discovered in the old site; but a small fungous projection with a broad base was felt on the left side of the trigonal space. The projecting portion of this was removed in the same way. The patient, from this period, got rid of all his uneasy sensations; his urine was retained for a longer period; and, six weeks after the first operation, he was dismissed cured. The most careful examination failed to detect the slightest remains of the fungous tumour.—*Ibid.* from *Ibid.*, 5th Oct. 1843.

43. *Foreign bodies in the external Auditory Canal.*—M. MARCHAL related to the French Academy of Medicine the following case:—

A captain in a cavalry regiment, began to be rather deaf of the right ear, in the year 1821. One day, during the winter of that year, he perceived a kind of motion in the ear; it seemed to him as if something had given way, and for a short time he heard much better. From that date he remained subject to occasional deafness, and to humming in the right ear. At the beginning of the present winter he was seized with violent and continued headache, with buzzing, and nearly complete deafness on the right side. As these symptoms were attributed by me to a certain degree of cerebral congestion, I bled him from the arm, and applied fifteen leeches over the right ear. The headache was calmed, but the humming continued. I then examined the ear carefully; this I had some trouble in effecting, from a certain degree of flattening and thickening of the canal. Nothing was discovered, but thinking that there might be some hardened cerumen deeply situated, I ordered injections with an emollient fluid. These injections were continued, until one day, to the great surprise of the patient, a rosary-head escaped. From the alteration which it had undergone, it is evident that it must have remained a great length of time in the ear. M. Smidt does not remember when it was introduced, but thinks it must have been when he was only four or five years old, in which case it would have remained forty-five years in the ear. The bead being perforated, M. Smidt, rationally enough, conjectures that the different positions it assumed explain the alternations of surdity and tolerable audition which had so long been observed. From the moment of the extraction of the foreign body, he ceased to suffer from headache, and the audition became as perfect on the right as on the left side.

“Cases such as the above,” said M. Marchal, “in which foreign bodies in the ear have remained long unrecognized, are not rare in the annals of science. Among these are two worth recalling to memory. Power was treating a young girl affected with abundant salivation, who had fallen into a state of marasmus, and seemed nearly expiring. He had tried, without success, every means of treatment that he could think of, when he was induced, by some reason or other, to examine the auditory canal. From this he extracted a piece of fetid wool, of the presence of which the young girl was totally unconscious, and she very soon recovered her health. The second case is given by Fabricius, of Hilden. A little girl allowed a small ball of glass to get into the meatus auditorius. Vain attempts were made to extract it, and it was lost sight of. Some time afterwards hermicrania on that side made its appearance, as also incomplete paralysis of the corresponding side of the body, accompanied by pains similar to those of the head, and, like them, subject to changes under the influence of atmospheric variations. After suffering five years she was seized with epileptic fits, and the left arm became atrophied. Fabricius learnt, by chance, from his patient, the circumstance of the glass ball having been introduced years before into the ear. On examination he ascertained that it was still there, extracted it, and the accidents ceased. In this case the whole train of symptoms appear to have been produced by pressure on some branches of the fifth pair.”

Baron Larrey, during the inspection of Algeria, which he made a short time